## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

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28523 PFIZER INC. PATENT DEP. BId 114 M/S 11 EASTERN PO	ARTMENT	77/2010		Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
GROTON, CT						(Depositor's name)
,				*******		(Signature)
			L		**************************************	(Date)
APPLICATION NO.	FILING DATE	3	FIRST NAMED INVENTO	R	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/575,395 TITLE OF INVENTION	03/13/2007 N: SUBSTITUTED 2H-	[1,2,4]TRIAZOLO[4,3-A]I	John William Benbow PYRAZINES AS GSK-	3 INHIBITORS	PC026073A	9039
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810	04/07/2010
EXAMINER		ART UNIT	CLASS-SUBCLASS	7		
MURRAY, JEFFREY H		1624	514-249000			
<ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> </ol>			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
PLEASE NOTE: Unrecordation as set for (A) NAME OF ASS	aless an assignee is iden th in 37 CFR 3.11. Com IGNEE		data will appear on the T a substitute for filing a (B) RESIDENCE: (CIT NEW YOR	patent. If an assign a assignment. Y and STATE OR C	•	
4a. The following fee(s) are submitted:  Issue Fee Publication Fee (No small entity discount permitted) Advance Order - # of Copies  5. Change in Entity Status (from status indicated above)			b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 16-1445 (enclose an extra copy of this form).			
	atus (from status indicate ns SMALL ENTITY stat		Th Applicant is no lo	ngar claiming SMA	LL ENTITY status. See 37 C	PD 1 277-1/21
					istered attorney or agent; or the	
Authorized Signature Typed or printed nage		ichtowski	Office.	Date	MARCH ZDI 10. 48,032	
submitting the complete this form and/or suggest	d application form to the distribution of the distributions for reducing this by Virginia 22313-1450.	e USPTO. Time will vary urden, should be sent to the	depending upon the ind chief Information Office	retain a benefit by the stimated to take 12 stimulated to take 12 stimulated to take 12 stimulated to take 12 stimulated to take 11 stimulated to take 12	he public which is to file (an minutes to complete, includin mments on the amount of ti Trademark Office, U.S. Dep S. SEND TO: Commissioner	ng gathering, preparing, and me you require to complete

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